

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012707

FILED
Feb 25, 2009
Secretary of State

Entity Name: MINISTERIO CRISTO LA ROCA VIVA INC.

Current Principal Place of Business:

207 TRUMAN AVE
LEHIGH ACRES, FL 33972

New Principal Place of Business:

204 E JERSEY RD
LEHIGH ACRES, FL 33936

Current Mailing Address:

207 TRUMAN AVE
LEHIGH ACRES, FL 33972

New Mailing Address:

204 E JERSEY RD
LEHIGH ACRES, FL 33936

FEI Number: 56-2624492

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSSA, CRISTINA
416 CANDLEWICK CIRCLE S
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

OSSA, CRISTINA
204 W 7 ST
LEHIGH ACRES, FL 33972 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CRISTINA OSSA

02/25/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RODRIGUEZ, COSME
Address: 207 TRUMAN AVE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VP () Delete
Name: RODRIGUEZ, MARIA E
Address: 207 TRUMAN AVE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: T () Delete
Name: OSSA, SABRINA
Address: 1104 THOMPSON AVE
City-St-Zip: LEHIGH ACRES, FL 33972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RODRIGUEZ, COSME
Address: 204 E JERSEY RD
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP (X) Change () Addition
Name: RODRIGUEZ, MARIA E
Address: 204 E JERSEY RD
City-St-Zip: LEHIGH ACRES, FL 33936

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: COSME RODRIGUEZ

P

02/25/2009

Electronic Signature of Signing Officer or Director

Date